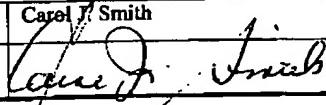
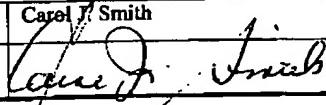
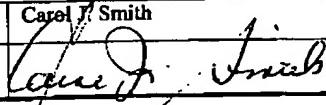


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JUN 15 2005

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: D2308																					
In re Application of	Xin Qiu																						
Application Number	09/587,932	Filed 06/06/2000																					
For	CONFIGURABLE ENCRYPTION/DECRYPTION FOR MULTIPLE SERVICES SUPPORT																						
Group Art Unit	2135	Examiner Linh L D Son																					
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired):</p> <table style="margin-left: auto; margin-right: auto;"> <tr><td><input type="checkbox"/></td><td>One Month (37 CFR 1.17(a)(1))</td><td>\$ 110.00</td></tr> <tr><td><input type="checkbox"/></td><td>Two Months (37 CFR 1.17(a)(2))</td><td>\$ 430.00</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Three Months (37 CFR 1.17(a)(3))</td><td>\$ 980.00</td></tr> <tr><td><input type="checkbox"/></td><td>Four Months (37 CFR 1.17(a)(4))</td><td>\$ 1530.00</td></tr> <tr><td><input type="checkbox"/></td><td>Five Months (37 CFR 1.17(a)(5))</td><td>\$ 2080.00</td></tr> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number 502117</p> <p><input checked="" type="checkbox"/> I have enclosed a duplicate copy of this sheet.</p> <p>I am the:</p> <p><input type="checkbox"/> Applicant/inventor</p> <p><input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71.</p> <p><input checked="" type="checkbox"/> Attorney or agent of record (Registration No.: 44,489)</p> <p><input type="checkbox"/> Attorney or agent under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) _____</p> <p><u>6/15/05</u> Date <u>E. T. Cullen</u> Signature <u>June 15, 2005</u> <u>Lawrence T. Cullen</u> Type or printed name</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of 2 form(s) are submitted</p> <p style="text-align: center;">CERTIFICATE OF MAILING</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on this date: <u>Fax'd on June 15, 2005</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Typed or printed name</td> <td colspan="2" style="width: 67%;">Carol J. Smith</td> </tr> <tr> <td>Signature</td> <td colspan="2"></td> </tr> </table>			<input type="checkbox"/>	One Month (37 CFR 1.17(a)(1))	\$ 110.00	<input type="checkbox"/>	Two Months (37 CFR 1.17(a)(2))	\$ 430.00	<input checked="" type="checkbox"/>	Three Months (37 CFR 1.17(a)(3))	\$ 980.00	<input type="checkbox"/>	Four Months (37 CFR 1.17(a)(4))	\$ 1530.00	<input type="checkbox"/>	Five Months (37 CFR 1.17(a)(5))	\$ 2080.00	Typed or printed name	Carol J. Smith		Signature		
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Signature																							

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